

INCLUSIVE EDUCATION IN GUYANA: A CALL FOR CHANGE**Amanda Ajodhia-Andrews**

and

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This study examines inclusive education within Guyana for children with special needs (zero to eight years), from the perspectives of policy makers, teachers, and parents (n = 22). The study is framed within a social-constructivist perspective, and uses grounded theory for the collection and analysis of data. Four themes emerged from the data as potential barriers to implementing inclusive education in Guyana: attitudes and perceptions toward those with special needs, change agents, resources, and experiences with children with special needs. This study describes the interrelating relationships between the core phenomenon (i.e., attitudes toward those with special needs), and the other conditions (i.e., change agents, resources, and experiences with children with special needs) necessary for successful inclusion. The interrelationship between these factors stimulates strategies or actions. These lead to consequences, which prevent sustainable and successful inclusive education within Guyana. There is a discussion of recommendations and conclusions that may assist in supporting inclusive education within Guyana.

Inclusion respects and values the diversity of each child, acknowledging that he or she is a contributor to society, regardless of abilities (Crippen, 2005; Rallis & Anderson, 1994). The United Nations Convention on the Rights of Persons with Disabilities acknowledges that all children with special needs have equal human rights and freedom as any other child (United Nations, 2006). The United Nations Convention on the Rights of the Child further declares that all children (with or without special needs) have basic rights to an education, and to experience full involvement within society (Frankel, 2004; United Nations, 1989). In keeping with the pledge for *Education for All*, the Salamanca Statement highlights the right of those with special needs to obtain an education within any regular education system (United Nations Educational Scientific and Cultural Organization [UNESCO], 1994). This statement also asserts that regular classrooms should accommodate to meet the needs of all children as a means of reducing prejudiced attitudes, and to promote a more accepting society (UNESCO, 1994).

Inclusion is the practice of establishing heterogeneous classrooms in neighbourhood schools, where every child strives to accomplish individual goals while fully participating in social and academic activities. This often requires modifying the curricula and the environment in order to ensure the success and attainability of these goals (Lipsky & Gartner, 1996; Oremland, Flynn, & Kieff, 2002). Inclusive education is a system that supports and accommodates for the diverse needs and abilities of all students within a typical education setting (Bergsma, 2000; Crippen, 2005; Eleweke & Rodda, 2002; Skrtic, Sailor, & Gee, 1996). Inclusive education requires a systemic educational reform and restructuring of the school system (Bergsma, 2000); this is particularly true in developing countries (i.e., countries which maintain low-income and middle-income economies, where a majority live on less income and lack essential public services compared to extremely industrialized countries [The World Bank Group, 2006]).

Policy makers within developing countries may not have the necessary funds and information required to implement legislation and guidelines related to inclusive education and special needs. They may also face resistance or challenges from teachers and parents. Conversely, teachers may perceive a lack of training and resource supports. Parents of children with special needs may perceive a lack of encouragement for parental involvement within the schools. These parents may also feel an overall

sense of shame and stigma when their child with special needs attends the regular schools. Also to consider when examining a country's inclusive practices, are the sustained socio-cultural and political beliefs and attitudes. Through the experiences and views of various policy makers, teachers, and parents, this study addressed such issues related to inclusive education with Guyana.

Developing Countries

Inclusive education for children with special needs is an evolving issue within many developing countries. Approximately 600 million people with disabilities exist worldwide, all of whom encounter physical and social boundaries within cultural life (UNESCO, 2006; World Health Organization [WHO], 2007). Of this total, it is estimated that 80% of people with disabilities live in developing countries (UNESCO, 2006; WHO, 2007). One hundred and fifty million of these are children with disabilities, of which less than 2% are receiving rehabilitation (Eleweke & Rodda, 2002).

Developing countries encounter countless challenges when attempting to implement inclusive education. For example, the facilities to accommodate for children with special needs within these countries are often non-existent or inadequate (Eleweke & Rodda, 2002). Many developing countries lack basic educational materials and equipment to provide a sufficient education for children with special needs (Eleweke & Rodda, 2002; Peresuh & Barcham, 1998).

There is also the need for trained special education teachers and professionals (Stough, 2003). Although colleges or universities within these countries may provide special education training, there is a growing concern regarding the adequacies of the programs; these programs tend to concentrate on the pathology of disabilities, rather than instructing on modifications to suit the needs of the child (Eleweke & Rodda, 2002; Stough, 2003). In addition, there is a lack of programs for professionals that assist in supporting the overall quality of inclusive education (e.g., psychologists, speech and language pathologist, therapists, etc.) (Eleweke & Rodda, 2002).

Developing countries struggle to maintain a suitable funding structure to support special needs programs or reforming of the education system. Chaikind, Danielson, and Brauen estimated that providing educational services for children with special needs could cost 2.3 times more than providing an education for children without special needs (as cited in Eleweke & Rodda, 2002). As a result, special needs education is not a priority among the government's budget within many developing countries. Furthermore, there is often a lack of compulsory laws, policies, and legislation within developing countries to ensure the provision of services for children with special needs (Eleweke & Rodda, 2002; Hall & Figueroa, 1998; Peresuh & Barcham, 1998).

Guyana is a developing Caribbean country which is striving to establish inclusive education policies, laws, and practices for children with special needs. According to the 2002 census, approximately 2.2% of its population is made up of those with special needs (Mitchell, 2005). Guyana has not yet developed an official definition of the term disability, and is still in the midst of implementing programs for identifying special needs in early childhood (International Disability Rights Monitor [IDRM], 2004). While Guyana does maintain a National Policy on the Rights of People with Disabilities, it does not specifically address children's rights, accessibility of buildings, or transportation for children with special needs (IDRM, 2004; United Nations, 2004). *The 2005 Guyana Report on Human Rights Practices* does not clearly acknowledge the rights of children with special needs or the lack of services available to these children (U.S. Department of State, 2006). Guyana's teacher education programs attempt to provide adequate special education training, however, many teachers graduate without sufficient skills and knowledge to teach within an inclusive environment. There is a demand for teacher training, special needs specialists, and a fundamental reform of the education system in order to allow for the principles and practices of inclusive education in Guyana (Bergsma, 2000; National Development Strategy, 1996; Non Governmental Organization [NGO], 2003; O'Toole & Maison-Halls, 1994; O'Toole & Stout, 1998).

Guyana currently maintains a final draft of its Persons with Disabilities Bill. Developed in 2007, this bill advocates for the inclusion of children with special needs within the regular education system and supports teacher training in areas of disability and inclusive practices (Guyana Association of Women Lawyers, 2007). Guyana has also implemented Community Based Rehabilitation (CBR) projects as a grass roots approach to include children with special needs into neighborhood schools (Miles, 2001; NGO, 2003). The CBR projects seek to promote the awareness of disabilities, as well as involve the participation of rural communities within Guyana in developing and implementing rehabilitative

programs (O'Toole, 1993; O'Toole & Maison-Halls, 1994; O'Toole & Stout, 1998). Through training from rehabilitation therapist, members within the community (e.g., teacher, parents, health care workers, volunteers, etc.) are empowered to develop programs and supports for children with special needs (O'Toole, 1993; O'Toole & Maison-Halls, 1994; O'Toole & Stout, 1998).

Attitudes and Beliefs

Positive attitudes and beliefs are the foundation for successful inclusion. Maintaining optimistic beliefs and values pertaining to persons with disabilities influences the extent to which a society fluidly exercises inclusive practices. However, inclusive ideologies are often determined by the cultural and political context of a country.

Attitudes toward those with Special Needs within Guyana

Society. Societal negative attitudes are reported as the main barrier preventing Guyanese children with special needs from equal educational access (Ministry of Education and Cultural Development Guyana, 1995). Groenewegen (2004) concluded that Guyanese communities continue to stigmatize those with special needs, and perceive them as a societal burden. Guyanese with special needs are rarely presented with opportunities for self development and employment (Groenewegen, 2004). The National Commission on Disability (NCD) surveyed the perspectives and experiences of 1485 people with special needs across Guyana. Roughly half of the participants (44%) experienced negative attitudes from Guyanese society due to their disability (Mitchell, 2005). Specifically, participants reported experiences of name calling (60%), staring (49%), resentment (17%), exclusion (12%), and other (3%) (Mitchell, 2005). Participants indicated that these experiences contributed to their low self-esteem and hindered them from being involved with society. Consequently, the incessant discrimination discouraged those with special needs from participating within the community. Approximately 49% of participants felt ashamed and disrespected due to the negative perceptions of others, and 14% of participants reported complete social isolation, without the desire to leave their homes or to invite home visitors (Mitchell, 2005).

Teachers. Groenewegen (2004) explained that within Guyana, few teachers are willing to welcome a child with special needs into their regular classroom. However, in the few cases where a child is admitted into the regular classrooms, teachers struggle to dedicate the extra attention necessary for the child. Mitchell (2005) reported that teachers' negative attitudes inhibit the participation of children with special needs in the regular schools of Guyana.

Parents of children with special needs. Groenewegen (2004) described most Guyanese parents as frequently keeping their children with special needs at home, hidden from society. Parents rarely permit their child to go out into public, and many neighbours are unaware that a child with special needs resides next door (Groenewegen, 2004). The NCD report indicated that 222 respondents with special needs never attended school, and 46% of these individuals stated that they *never attempted to participate in education* (Mitchell, 2005, p.27). Over half of these 222 respondents (52%) expressed this was due to parental attitudes; *Parents did not encourage me* (Mitchell, 2005, p. 27). During focus groups, parents of children with special needs described experiences of blame from other family members and friends, asking them *what they had done wrong in life to get a child with a disability* (Mitchell, 2005, p. 60).

The purpose of this qualitative study was to explore inclusive education for children with special needs (zero to eight years) within Guyana from the perspectives of policy makers, teachers, and parents of children with special needs, who must make the change toward inclusion. The goal was to document and acknowledge the many emotions, experiences, attitudes, and challenges related to inclusive education within Guyana. Through this exploration it was possible to develop a theory pertaining to inclusive education within Guyana.

In order to access these perspectives, we asked the following questions: What does inclusive education mean to each group of participants, and how do they perceive children with special needs? What are the participants' experiences with children with special needs? What are the challenges in providing inclusive education within Guyana? What necessary supports do the participants believe are required in order to ensure for inclusive practices within the schools of Guyana? Finally, what progress has Guyana made in terms of implementing inclusive education policies and practices? Discovering the extent of these diverse perspectives provided explanations to support inclusive education policies and practices within Guyana.

Method

Design

Grounded theory is a qualitative design used to systematically generate theories rooted within the data (Glaser & Strauss, 1967). Within this study, the term *theory* denotes a set of well developed categories (e.g., themes, concepts) that are systematically interrelated through statements of relationship to form a theoretical framework that explains some relevant social, psychological, educational, nursing, or other phenomenon (Strauss & Corbin, 1998, p. 22). Discovering a theory involves the continuous comparison of emerging categories within the data, as well as theoretical sampling of data collection procedures, concepts, and diverse perspectives to emphasize properties of the categories (Corbin & Strauss, 1990; Creswell, 2003; Creswell, 2005; Glaser & Strauss, 1967; Wuest, 1995). In addition, a grounded theory research design asserts *theory as process* (Glaser & Strauss, 1967, p. 32). The theory is methodically and sequentially expanding and changing over time; it is never considered to be completely precise and perfect. Therefore, the theory is perceived to be grounded within a reality of social action and interactions (Corbin & Strauss, 1990; Creswell, 2005; Glaser & Strauss, 1967; Wuest, 1995). It is neither the *minor working hypotheses* nor is it the *grand theory* (Glaser & Strauss, 1967, p. 33). Rather, it is a middle-range theory founded in the perspectives of various individuals and data sources explaining a substantive or empirical topic (Creswell, 2005; Glaser & Strauss, 1967).

For the purpose of this study, a grounded theory design was utilized to inform a theory concerning inclusive education within Guyana. This theory is grounded in the perspectives of policy makers, teachers, and parents of children with special needs.

Data Collection

The data collection for this study was conducted during a four week period within Guyana. Guyana is composed of 10 administrative regions. Three regions were selected for this study: Region 2 (i.e., Pomeroun-Supenaam Region), Region 4 (i.e., Demerara-Mahaica Region), and Region 6 (i.e., East Berbice-Corentyne Region). The communities of Region 2 selected for this study include Adventure, Suddie, Taymouth Manor, and Cotton Field. The selected city for Region 4 includes Guyana's capital city, Georgetown. Within Region 6, New Amsterdam was the only city selected.

There were 22 participants involved with this study. All obtained data and information was gathered through the use of individual interviews, focus group interviews, observational field notes, and documents. A semi-structured interview guide approach with open-ended questions and pre-established topics, issues, and probes were used (Cohen, Manion, & Morrison, 2003). Questions concentrated on the participants' emotions, experiences, attitudes, and concerns regarding inclusive education within Guyana. Distinct interview protocols were designed for each group of participants. Also, to support focus group interviews, a focus group guide/script was created (Vaughn, Schumm, & Sinagub, 1996).

Participants

Sampling. Participants for this research study were non-randomly selected. The sample population and regions were obtained from both convenience sampling and purposeful sampling. Convenience sampling was utilized, because of feasibility and access to the participants and regions (Del Balso & Lewis, 2001). The participants, regions, and communities were conveniently selected based on collaboration with supporting organizations of this research study (i.e., United Nations Children's Fund [UNICEF] Guyana and the Guyana Ministry of Education). Purposeful sampling was also utilized, as all participants and regions within this study maintained certain characteristics to meet the purpose of this study (Creswell, 2005; Del Balso & Lewis, 2001). Specifically, maximal variation sampling was used as a form of purposeful sampling since multiple perspectives from diverse groups were gathered in order to highlight issues of inclusive education within Guyana (Creswell, 2005). The sample of participants differed based on their titles (i.e., policy maker, teacher, or parent of a child with special needs), regions, and communities within the regions. Another purposeful sampling strategy used was theoretical sampling, because the participants were intentionally selected to generate a theory (Creswell, 2005). Participants were selected based on *theoretical relevance* for developing categories and properties related to inclusive education in Guyana (Glaser & Strauss, 1967, p. 49; Strauss & Corbin, 1998).

Recruitment of participants. UNICEF Guyana and the Guyana Ministry of Education assisted in recruiting participants. Due to possible coercion from either organization, it would have been ideal for neutral persons within the communities to aid in the recruitment process. However, this was not

feasible. To reduce the amount of potential coercion, a recruitment flyer was sent UNICEF Guyana, which they distributed within the aforementioned communities. The flyer briefly explained the purpose of the study, and requested community members to participate in valuable discussions regarding inclusive education in Guyana. The flyer also emphasized confidentiality and the use of pseudonyms, as well as provided UNICEF Guyana's contact information.

Participants' characteristics. Participants within this research study included policy makers, teachers, and parents of children with special needs. A majority of participants conversed in Guyanese Creole English, while others spoke in Standard English. In addition, most participants were Guyanese citizens of African descent. Five policy makers from Region 4 participated within this study. This included representatives from the Guyana Ministry of Education and from the NCD. Nursery school and primary school teachers within Region 2 and Region 6 also participated within this study. Of the 13 teacher participants, 9 had either completed or were in the process of completing, the requirements for a teaching certificate at the Cyril Potter College of Education (CPCE). As indicated throughout interviews, these teachers range in teaching experience between two months to 36 years, with an average of approximately 12 years. Four parents of children with special needs from Region 4 and Region 6 also participated within this research. Each parent had no more than one child with special needs. Therefore, a total of 22 participants were included within this study.

Procedure

Prior to conducting each interview, participants signed consent forms. Consent forms were tailored to suit each group of participants (i.e., policy makers, teachers, and parents). The principal investigator also verbally reassured confidentiality among participants and within each consent form. Only titles (e.g., policy makers) and pseudonyms were used throughout this research paper. In addition, during focus group interviews, all participants signed a Promise of Confidentiality form to help ensure that shared information remained confidential.

Each participant was either individually interviewed or participated in a focus group interview. The principal investigator conducted interviews in a private office, boardroom, or classroom. Interviews were between 30 to 90 minutes in length. She recorded all interviews through the use of audio taping and observational field notes. These notes were documented as accurately as possible, recording participant information (e.g., type of interview, name, start and end time, etc.), as well as any emerging themes, nonverbal cues, behaviours, emotional climate, and reactions. To ensure for greater accuracy and to limit the amount of interpretive errors, the observational notes were read to participants at the end of each interview in order to allow for any corrections. This member checking was also used in the focus group interviews to verify the general feelings of members regarding inclusive education in Guyana (Brantlinger, Jimenez, Klingner, Pugach, & Richardson, 2005; Creswell, 2005).

Data Analysis

All audiotapes, notes, and documents were gathered and transcribed. Member checking by reading observational notes to participants at the end of each interview verified responses and key themes, as well as ensured for greater accuracy and clarity. Validity of responses was also provided through triangulation: cross referencing the obtained data with different sources of information (Brantlinger et al., 2005; Creswell, 2005). Comparing transcripts, observational field notes, and government documents carried this out.

To organize and interpret the gathered data and information three phases of coding were applied: (1) open coding, (2) axial coding, and (3) selective coding (Creswell, 2005; Strauss & Corbin, 1998). Categories, constructs, and relationships were established through the use of these coding procedures and memos. This assisted in generating a theory to explain inclusive education within Guyana.

Open coding. During open coding, the principal investigator gathered and divided all data into sections to form categories and subcategories relevant to the purpose of this study (Creswell, 2005). The data was segmented, analyzed, compared, and contrasted (Corbin & Strauss, 1990; Strauss & Corbin, 1998). She was guided by the data, continuously creating categories and subcategories with properties and dimensions until they became *saturated*: the data no longer provided any new information to develop categories (Creswell, 2005; Glaser & Strauss, 1967; Strauss & Corbin, 1998). Categories were established through continuously asking questions of the data (e.g., what is happening here? what are these statements emphasizing? are there patterns within the data?). Once transcripts were coded and various categories emerged, subcategories and properties were identified. For example, during the

interviews all participants discussed issues of the predominant attitudes maintained by Guyanese society toward those with special needs. This was coded as *attitudes maintained by Guyanese society*, and became one subcategory in the emerging category that described *attitudes and perceptions toward those with special needs*. Within this subcategory, various properties were accounted for, such as stigmatization, perceptions maintained by medical professionals, dependency of those with special needs, disregard/hide those with special needs, etc. For instance, Baily, a special needs teacher stated, *In this country, persons with disabilities is like they don't exist. They don't talk about them much; people hardly know that there are persons living with disabilities....People in society... their whole outlook of person with disability is negative*. Properties emphasized in this statement are the negative societal attitudes toward those with special needs, and the tendency to disregard/hide those with special needs.

Four significant categories were identified through the process of open coding: 1) attitudes and perceptions toward those with special needs, 2) change agents, 3) resources, and 4) experiences with children with special needs. These categories were identified throughout all groups of participants. Within these categories, various properties and dimensions were also investigated.

The first category, *attitudes and perceptions toward those with special needs*, reflects individuals' beliefs, feelings, and thought processes pertaining to those with special needs, in particular children with special needs. *Change agents* refers to the notion of having individuals who are knowledgeable and accustomed to the principles of inclusion and inclusive education. Change agents also serve as leaders and advocates for children with special needs. The third category, *resources*, represents the supports necessary for the successful implementation of inclusive education. This includes teacher training/professional development, parent training/parent support groups, human resources, equipment and materials, and finances. *Experiences with children with special needs* is the final category. It emphasizes the nature of the participants' past or current experiences with children with special needs. The quality of these experiences may be positive or negative.

Axial coding. After establishing major categories and properties, the second phase of analysis was conducted; axial coding. During this phase, one category was selected and identified as the central core phenomenon of the process explored (Creswell, 2005). This core category was selected based on the following criteria: it can be related to all categories, it frequently occurs within the data, the relationship established among the other categories is logical, the label given to the phenomenon should be abstract, the theory is enhanced when the concept is improved, and the explanation is still supported if conditions change (Strauss & Corbin, 1998, p. 147). The other categories and properties were then related to the core phenomenon, creating interrelationships between all established categories (Creswell, 2005; Strauss & Corbin, 1998). This involved identifying emerging conditions, strategies and interactions, as well as consequences of using these strategies (Corbin & Strauss, 1990; Creswell, 2005; Strauss & Corbin, 1998).

A coding diagram was developed to visually display and describe these relationships (see Figure 1 next page) (Corbin & Strauss, 1990; Creswell, 2005; Strauss & Corbin, 1998). For example, *attitudes and perceptions toward those with special needs* was considered to be the central category, as it fits the aforementioned criteria. The other categories (i.e., change agents, resources, and experiences with children with special needs) were identified as conditions that are associated to *attitudes and perceptions toward those with special needs*. Particular strategies and consequences were also influenced by the core category and the conditions.

Selective coding. In the final phase of the analysis, a broad theory was generated and refined from examining the interrelationship among the categories (Creswell, 2005; Strauss & Corbin, 1998). After creating a storyline, a theory was discovered providing *an abstract explanation for the process being studied in the research* (Creswell, 2005, p. 398).

Theoretical Assumptions

This study was framed within a constructivist perspective: acknowledging and validating participants' subjective views, experiences, and meanings pertaining to inclusive education within Guyana (Creswell, 2003). These views and meanings are socially, historically, and culturally constructed (Creswell, 2003). Lincoln and Guba asserted that the researcher is the main research instrument used within the data collection process (as cited in Creswell, 2003). As the primary research instrument, it is acknowledged that we filtered the data through personal life, cultural, and ethnic experiences and

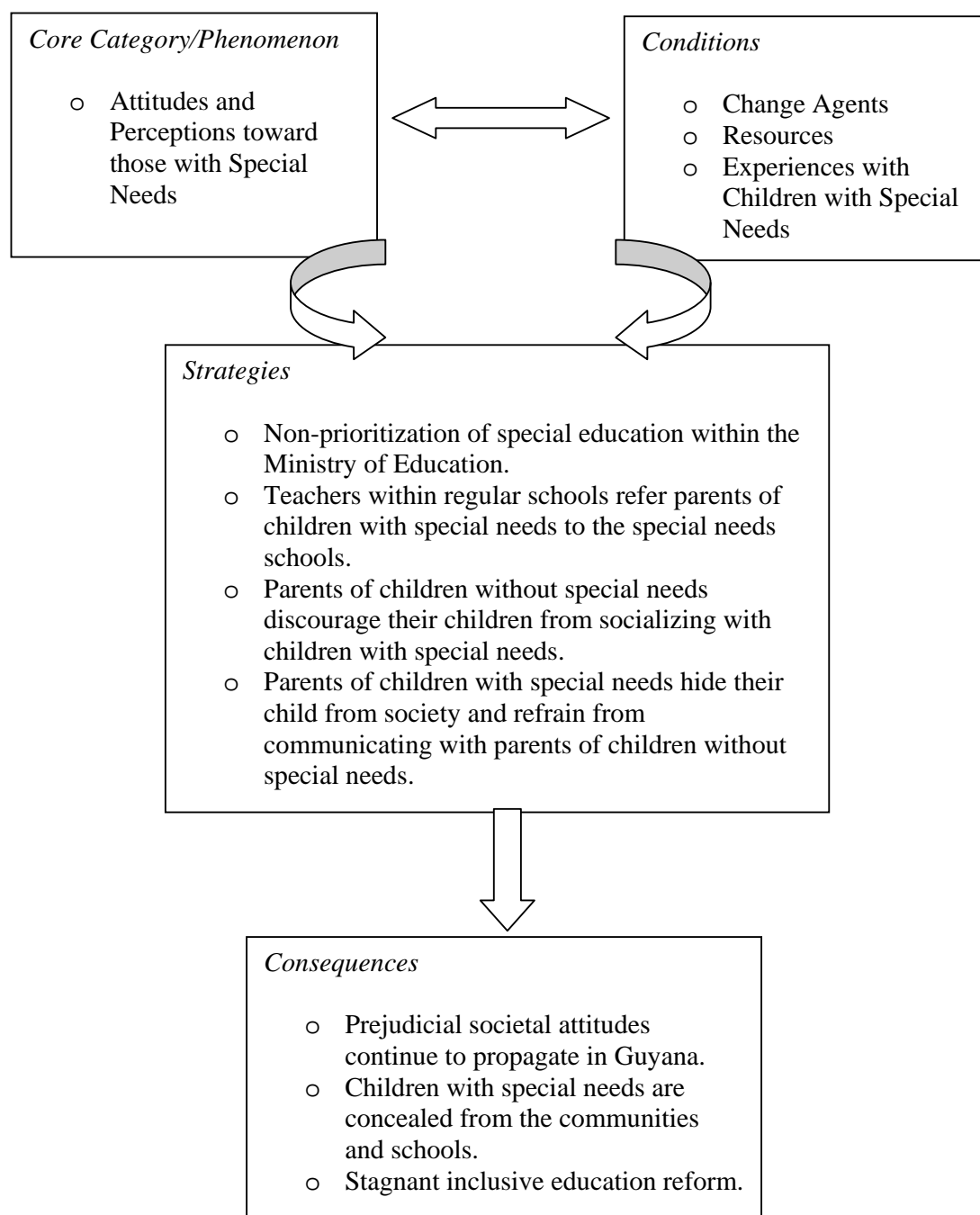


Figure 1.
Axial Coding: Theoretical Model of Potential Barriers to Inclusive Education in Guyana.

perspectives. Therefore, we made interpretations in an attempt to understand participants' perspectives in order to generate a theory grounded within these views (Creswell, 2003; Strauss & Corbin, 1998).

Findings

The core category, as well as emerging conditions, strategies, and consequences assists in developing a broad theory to explain the process of inclusive education within Guyana. This theory highlights specific factors that may be perceived as potential barriers to implementing inclusive education within Guyana. Four significant themes were identified: 1) attitudes and perceptions toward those with special needs, 2) change agents, 3) resources, and 4) experiences with children with special needs.

Attitudes and Perceptions toward those with Special Needs

Participants reported that the prevalent negative attitude maintained among Guyanese society, teachers within regular schools, and parents of children without special needs was one of the greatest challenges in implementing inclusive education within Guyana. Issues of stigma, ridicule, a lack of patience and time, a sense of burden, as well as prejudicial attitudes, were all expressed as being critical barriers toward supporting inclusion for Guyanese children with special needs.

Attitude of Guyanese Society

Participants highlighted the predominant negative attitudes maintained within the Guyanese culture toward those with special needs. Penny, a policymaker, expressed,

Our culture, our attitude, you know the stigmatism...all of these things are a part of what hampers the progress of children with disabilities. Specifically in this country, once we recognize the person has a disability we say, 'well they can't do anything educationally' you know and we put them in the background...the first move for any sort of inclusion for persons with disabilities is orienting peoples' minds and attitudes towards the capabilities of persons with disabilities.

Participants also disclosed the tendency for Guyanese society to ignore and discriminate against those with special needs. Jessie, a teacher from Region 2 witnessed children with special needs being ridiculed by other children and adults,

There's [sic] some people who would call them, persons with disabilities, names. And they would, you know, fatigue them, pelt them and things like that, so they must have an attitude....they must change their attitude....They shouldn't pelt them, they shouldn't call them by false name....

Participants also reported the apathetic and discouraging attitudes of the Guyanese medical community. Penny sincerely described,

My son was born with this physical disability. And as I sit here, I don't have a medical diagnosis for my child being born...I don't have it. Obviously, they [doctors] always point at you, as you caused the child to be born with the disability, so they ask you all sorts of questions. So you get the blame, but they never come up with something that to tell you that well this child has whatever...don't lambaste them as one doctor did to me 'why did you make this child? He's going to be nothing else than a liability to you, and a burden to society.' I got that from a doctor. My child was 6 weeks old and I had to take him to that doctor. I came out of his office in tears saying this it for me.

Attitude of Teachers within Regular Schools

Participants also recurrently discussed the discouraging attitudes maintained by teachers in regular schools; often these teachers demonstrated a lack of patience in coping and attending to children with special needs. Gale, a parent of a child with special needs expressed, *Honestly speaking in the public school, the normal school, the children that have disabilities, they [teachers in the regular schools] don't see them. They don't provide for them....they wouldn't find time to talk to that child.*

Special needs teacher Baily, explained the importance of being patient.

Here [special needs school], it's definitely challenging, because patience is a must...and it's not [the] usual patience that you have to have to get to teach the regular children, you have to stretch it a bit more, it requires a lot of patience and understanding....

However, teachers within the regular schools acknowledged a lack of time for attending to children with special needs, rather than a lack of patience. Hazel, a nursery school teacher expressed this challenge of balancing time, *It's just you take a little time, a little more time for that child with special need....not forsaking the others [children without special needs]...*

Policy maker Kale, believed teachers maintained this attitude because it becomes a burden,

We now want teachers to be mothers, we want them to be policewomen, we want them to be nurses, we want them to be psychologists, we want them to do administrative work, and so on and so forth. So this poor teacher has to be all things to all people.... And now we're saying to her 'alright, take a child with special challenges into your class'...you know, 'add to what you're already doing'....some of them will feel 'oh god, another burden.'

Some parents also indicated that teachers within the regular schools recommended that they send their child to the special needs school. As Sandy reported, *...the teacher that does teach him [in the regular school], she tell [sic] me to bring him [to the special needs school]...because she was tired with him....*

Attitude of Parents of Children without Special Needs

Participants also accounted for the negative attitudes sustained by parents of children without special needs. They described occurrences of teasing and ridicule toward children with special needs from these parents. Jessie, a teacher, considered situations of when she had to refrain such parents from name calling children with special needs, *...you have to tell them [parents of children without special needs]....don't call him 'dumb boy,' or don't call him 'deaf boy,' he has a name. Don't call this one 'limpy' you know, he has a name. Nadine, a parent, explained her avoidance of parents of children without special needs due to their negative perceptions,*

...I keep away from them [parents of children without special needs]...When he [her son] come out of school [regular school], they say 'why you take him out?' I say, I take him to a private school, I can't tell [them a special needs school] because some of the parents them make fun of him, like something bad. So that's what I have to tell them.

Participants reported that parents of children without special needs tend to blame the mother for the child's disability. They also mentioned that these parents perceived something terrible happening to their child if they associated with a child with special needs; perhaps their child may catch the disability. Penny, a policy maker and parent stated, *When it comes to the adults...the bigger people, they are the ones who carry thing 'don't play with that child, something gonna happen to you'*

Change Agents

Each group of participants described a lack of knowledgeable and experienced advocates for inclusive education within Guyana. The absence of agents who may assist and support change within the education system makes it difficult for inclusive education to occur. Jen, a policy maker explained this obstacle,

...we don't have a coordinator to oversee to pull these people [teachers, professionals, people within the Guyana Ministry of Education] together to meetings. Like if it's time for training so that person now knows the person, and can nominate that person to be trained local or overseas and so on....

Similarly, Penny passionately described the need for inclusive practices organized by those familiar with inclusion. She stated,

We need a system that comes from the minds of those who are able to detect these persons with disability and get ready for them as they come to school...accessibility....How do they get into the school? Do they have to climb steps when they can't climb steps? How do they work in the regular classroom even though they are children with disabilities? That kind of system is what is needed to get a spiralling effect moving up to the policy makers and coming back down, trickling down to those who are down here. We need that kind of system so it can work. But we don't have that here.

Teachers also emphasized the lack of change agents for inclusive education in Guyana. Hazel, a primary school teacher expressed,

....we need people to sensitize the public about children with disabilities so that they would know that [about special needs] and bring them out to society so that they would interact with other people and don't be ashamed of these children, don't be ashamed of them.

Guyana Ministry of Education

Many participants perceived educational officers within the Ministry of Education as serving as agents of change. Teachers such as Andrea stated, *...we need support from educational officers.* Parents also agreed that the support from the Ministry of Education was required for inclusive education. Nadine confirmed that, *The first thing is we need support from the educational officer. Without he or her*

support we can't get anywhere. Whitney, a policy maker within the NCD, clearly indicated the need for change agents among the higher levels of government in order to stimulate a change toward inclusive education within Guyana. She expressed,

If you can't get those at the top, how are you going to get those at the bottom level? Because if they're gonna look and say 'oh he's at the top, he doesn't care, why should we care.' So once those at the top level start to show interest, then you see, gradually it will come down and eventually everyone will show interest. But as long as you don't get that interest from the top level, you could talk until your face goes blue and no change will happen....

Furthermore, many participants indicated that the Ministry of Education has not placed special education as a priority.

Resources

All participants expressed the inadequate amount of resources required to successfully implement inclusive education in Guyana. Such resources included teacher training/professional development, human resources, funds, equipments and materials, and parent support group/training.

Teacher Training/Professional Development

Participants acknowledged the lack of teacher training and professional development within areas of special education and disability. Baily, a teacher at a special needs school expressed *...when you put them [children with special needs] in the regular schools, the teachers to teach them have to have knowledge of special education.* Parents also believed that more training is required for teachers working with children with special needs. Gale noted, *I think if they go to a training school they'd be more qualified and would be able to interact with the children.* Policy makers such as Whitney firmly stated,

We need training of teachers, better training, so they will be better equipped on how to handle a child with special needs....you cannot put a child with a disability in a regular school with a teacher that has no idea how to be able to take care of that child when they have them from 8:30-3:30 in the afternoon....

Teacher training and professional development were still recognized as insufficient despite the fact that the CPCE introduced (approximately in the year 2004) a mandatory special education course for all pre-service teachers. Policy maker Kale expressed,

...any teacher trainee going to the teacher training college would do a module in special education. This is not a very specialized module...this training [specialized] we can't offer here. If we have people like that, they generally go off to move in Jamaica or some other place, but none of [the] institutions have the capacity to offer this training.

It is important to note that acquiring a teaching certificate or degree is not a requirement to teach within schools in Guyana. Approximately 31% of the teacher participants did not receive any post-secondary education upon completion of high school. These teachers acquired all special needs knowledge and experiences *on the job*.

Lack of career path. Policy makers from the Guyana Ministry of Education highlighted the absence of a career path for teachers who wanted to acquire greater specialized training in special needs. Kale stated,

...we don't really have a career path in the ministry for persons with special education training. So that if they wanted to progress professionally...they have to leave the special education field to get a promotion.

Similarly, Jen explained, *...one of the problems is that people do not see a career path. People want to know if I get into this field what is the upward social mobility enclosed. And that is blurred at the moment.*

Transform attitudes. Furthermore, participants perceived teacher training as an approach to transform teachers' attitudes toward working with children with special needs. Pat, a teacher in Region 2, was a student in the special needs mandatory course at the CPCE. She sincerely revealed,

I have one child in my class...what should I say about him? He has difficulty learning. You know, sometimes you just feel like leaving this child all by himself because it just takes so much out of you...But when I started to do this course then I realize something was definitely preventing him from learning. And I work with that child and now he respond to oral

language and I talk to him and he would respond and able to write his name and other things...But you see when you don't know anything about it, oh gosh!...Because I personally before I started this course, like I don't know I have just a negative attitude towards [children with special needs], but you know when you get into it and you learn so much things about these children, you become so glad you know.

Human Resources/Professional Support

Participants also indicated a lack of professional or human resources to support children with special needs within the regular classrooms. Parents of children who attend a special needs school did not believe inclusive education was possible, due to the lack of in-class support for teachers. Rose stated,

I think the treatment and the learning he's getting here [special needs school], he would never get it in the primary school [public school]. Because in the primary school there does be like 50-60 children in a class and that teacher would not get the time to sit and learn that one child alone in the class...there is no other help in that class for the teacher.

Baily and Caron, teachers from special needs schools, echoed Rose's statement. Baily emphasized, *And then the classes in the regular school is no less than 30-40 children in the regular schools, and only one teacher per class.* Caron continued, *And placing the child into the school will be a disadvantage because he wouldn't have the specialized training or the attention that he deserves.* Teachers in the regular schools such as Gabiee stated, *No, I never really have any professional support coming in so far...Mainly we would send for the parents sometimes...But nobody never really came into the school to give us advice on how to deal with him and so on.*

Speech therapists in Guyana. Participants acknowledged the support of speech therapists within Guyana. Parents and teachers from all three regions indicated that speech therapists occasionally visited schools to provide advice or assistance for children with language impairments. However, participants indicated that this support was not consistent across schools or regions within Guyana. Baily, a teacher from Region 6, stated, *Speech therapy and the other, they used to come to the school but they don't come when they're suppose to. They don't come on a regular basis. In fact they haven't come for a long, long while.*

Volunteers. Speech therapists, as well as other professional supports (e.g., psychologists, occupational therapists, etc.) are made possible within Guyana because of a global volunteer support network. Policy maker Penny stated, *When it comes to speech therapists, occupational therapists, psychologists, whatever, whatever, they always come as volunteers...volunteers...from other countries.*

Funding and Policies

Participants also identified a lack of funds dedicated toward special education, and a lack of national policies for those with special needs within Guyana. Jen, a policy maker within the Ministry of Education stated, *Well, no monies are allocated to the department of education for SEN [special education needs] or inclusive education; it's for the primary schools, the secondary schools, and the nursery schools...It's money, right...we need financing [for inclusive education].* Kale, another policy maker within the Ministry of Education, described the current challenge for funding special education. She candidly expressed,

I fully realize that in order for us to do this [implement inclusive education], be realistic, we need to put a lot more resources into it...the various demands in our resources are many, and it's not that people don't want to put money into special education it's just that the same money is wanted to buy textbooks, to buy computers, to do this and to do that.

However, Penny, a policy maker from the NCD, believed that education for children with special needs is not a priority among educational officers, as this is demonstrated through the allotment of funds toward special education. Penny stated,

...it [inclusive education] takes money. Obviously, everything takes money and you need to have money to do whatever it is. You may look it as something that's pretty expensive, but everything you need to do, it has a budget. So, if they would think, if our policy makers would think disability, they would have a budget for this, and then things will happen. How do we get them to think disability!?

Equipment and materials. Teachers related the inadequate amount of funds for special education to the

lack of equipment and materials for supporting children with special needs within regular classrooms. Andrea stated, *Funding...funding and facilities or so, they're gonna need a lot of extra things to make life more comfortable for them [children with special needs]...to make learning more comfortable for them [children with special needs]*. Brie, a teacher from Region 2 stated, *No we don't have [equipment and materials], no we don't have...we think you need funding. You have to get funding for these materials.*

Parent Support Groups and Parent Training

Parent support groups and parent training were also resources that participants perceived as necessary for successful inclusive education. Participants highlighted that such support and training provide parents with not only the tools to cope with their situation, but also the understanding that they are not alone. Penny candidly revealed,

And when I started in the first instance as a parent I was one to say that my child is not school material, [he] cannot go to school then, because that's how I saw it in my head. But because of being a part of a support group, I came to recognize that 'why you as a parent didn't even try to check out the school systems or the educational systems to see if your child could be a part of school'...I'm grateful for that support group....The support group has caused me to make my child get out into society and he's now in school.

Experiences with Children with Special Needs

Participants' experiences with children with special needs were identified as positive or negative, as well as intimate or impersonal in nature. The nature of these experiences influenced the level of advocacy and leadership for children with special needs and inclusion, and also influenced their actions and interactions.

Policy makers from the NCD possessed intimate experiences with children with special needs, because they either have a special need themselves, or have a child with a special need. Through their experiences, these participants developed a sense of advocacy for those with special needs. Hilary, born with a special need, stated, *As a professional [in the NCD], being able to see a lot and learn and interact with other people who face similar challenges...I've been able...to try and change some of these perceptions.*

Some teachers discussed negative experiences with children with special needs. These teachers mostly described experiences of children's disruptive and violent behaviours, as well as their inattentiveness. Haley explained,

And then I had some other challenging students with the mentally retarded, right. I had a boy. When he get into his symptoms he would kind of like cuff up the children...he used to pull down the things, the aids on the walls...he used to kick up the door and so on.

With frustration, Gabiee expressed, *...I does try all strategies to get him settled. Like I would try to give him all sorts of things...I would give him story books, I would give him little colourings to do...and still sometimes it don't work....*

Other teachers depicted very positive experiences while working with children with special needs. Teachers who expressed positive experiences also mentioned intrinsic emotions such as *I love working with them and I gain a lot of satisfaction when I know that the children have learned*. Teachers who reflected on positive experiences frequently stated phrases illustrating advocacy for children with special needs. Phrases such as, *They're human beings just like everybody else. And they deserve the same amount of rights and the same amount of opportunities and so on as the other children...they shouldn't be left out because they have a disability... or ...they should not be discriminated. They should be treated as a normal person...because they have feelings too.*

All parents within this study expressed positive experiences and occurrences with their child. They shared stories that highlighted their child's independence, intelligence, and creativity. These parents also frequently commented on their child's right to an education and the right to be treated just as any other child.

Discussion

This study explored inclusive education for children with special needs (zero to eight years) within Guyana from the perspectives of policy makers, teachers, and parents of children with special needs.

Throughout this investigation, four themes have been identified as impacting inclusive education within Guyana: 1) attitudes and perception toward those with special needs, 2) change agents, 3) resources, and 4) experiences with children with special needs. The findings assist in developing an explanation to support inclusive education within Guyana.

The attitudes and perceptions toward those with special needs were highlighted as the core obstacle preventing successful inclusive education within Guyana. These findings are congruent with studies by Groenewegen (2004) and Mitchell (2005), which indicated continuous stigmatization and discrimination toward those with special needs in Guyana. Groenewegen (2004) and Mitchell (2005) also reported frequent teacher resistance within Guyana toward including a child with special needs within the regular classroom. These prejudices often affect the self-esteem of Guyanese with special needs, and discourage them from freely participating within society (Mitchell, 2005). Participants in this study emphasized that Guyanese society perceived those with special needs as a burden and liability to their families and to society. This belief is perhaps embedded within an underlying assumption that those with disabilities can not contribute to the economic development of the family or the country (i.e., financially or participate in chores and duties that typically parents would pay for).

Mallory, Nichols, Charlton, and Marfo (1993) suggested that children within developing countries often contribute to the economic development of parents and families, in which *resources flow from children to their elders* (p. 3). Within developing countries, the child plays an *instrumental* role by performing essential tasks or chores at no cost to parents (e.g., childcare, house cleaning, farming/food production, etc.), or by earning money for the family (Mallory et al., 1993). Guyanese children with special needs may be perceived incapable of accomplishing this role in comparison to the contribution of children without special needs. Therefore, a child with special needs becomes a continuous familial responsibility or burden.

Prejudicial attitudes are often learned through the family and culture (Jodl, Michael, Malanchuk, Eccles, & Sameroff, 2001; O'Bryan, Fishbein, & Ritchey, 2004; Oskamp, 1991), and become sustained through generational effects (Oskamp, 1991). In addition, there is often group pressure to conform to the predominant cultural views and beliefs, which determine the attitudes established among its societal members (Oskamp, 1991). This is especially true within a developing country like Guyana, where minimal knowledge and education exist pertaining to special needs. Consequently, Guyanese citizens conform to the predominant cultural belief toward those with special needs, even if it is negative. These attitudes may also be a form of cultural truisms: societal beliefs that are assumed to be valid and are rarely questioned (Zimbardo & Leippe, 1991). Thus, Guyanese society assume these beliefs are valid, because: 1) they are culturally embedded, 2) there is a lack of awareness and accurate knowledge pertaining to special needs, and 3) these attitudes continue to be passed down from generation to generation.

The negative attitudes toward those with special needs were associated with the absence of change agents within Guyana to support, lead, and advocate for inclusive education. The condition of not having adequate resources to support inclusive education was also related to the negative attitudes toward those with special needs within Guyana. Currently, there are not enough resources available to meet the educational requirements for children with special needs in Guyana (Mitchell, 2005). According to the *Situational Analysis of Children with Disabilities in the Caribbean*, Guyana maintains challenges in accessing human resources, obtaining sufficient funds, space, and materials, as well as implementing adequate amounts of special education courses and training for teachers (UNICEF, 2000). This challenge is faced by many developing countries that lack simple educational materials, equipment, and facilities required to achieve meaningful inclusion (Eleweke & Rodda, 2002). There is also an inappropriate funding structure within the Guyana Ministry of Education that does not allow it to financially provide for special educational services. This may be due to existing political and economic turmoil experienced by many developing countries (Eleweke & Rodda, 2002).

Participants' experiences with children with special needs were also a condition related to the negative attitudes toward those with special needs. Teachers and policy makers who reflected on positive or intimate experiences maintained a specific moral purpose toward educating, advocating, and caring for children; they were more likely to accept a child with special needs within their classroom. However, even if Guyanese teachers do maintain a more positive and accepting attitude toward children with special needs, inclusion may still be perceived as difficult due to the absence of adequate resources and training (Avramidis & Norwich, 2002; Scruggs & Mastropieri, 1996).

The findings within this study suggest an association between the core phenomenon (i.e., attitudes and perceptions toward those with special needs) and the other existing three conditions (i.e., change agents, resources, and experiences with children with special needs). If positive attitudes and beliefs become the predominant societal stance toward those with disabilities, this will impact the support for children with special needs, as well as foster inclusive education change agents, greater allocation of resources for special education, and policy development for those with special needs. However, these three conditions can also ameliorate the effects of attitudes and perceptions toward those with special needs. The interrelationship between the core category and the other conditions impacts certain strategies employed, and consequences resulting from these strategies.

Strategies

From participants' accounts, the strategy taken by those in the Ministry of Education is to not prioritize special education. Despite the current situation and issues surrounding special education and inclusion, there are no change agents within the Ministry of Education stimulating inclusive education reform within Guyana. As a result, the Ministry of Education struggles to provide sufficient resources, develop policies, and create units for special education. A common strategy among teachers within regular schools is to frequently refer parents of children with special needs to the special needs schools. As experienced by both teachers and parents within this study, the strategy among parents of children without special needs, is to discourage their own child from socializing and interacting with children with special needs. Considering the despairing attitude surrounding those with special needs in Guyana, it is not surprising that parents of children with special needs develop a sense of shame, fear, and denial. As a result, the strategy used among this group of parents is to hide or remove their child from society and to withdraw from communicating with other parents who do not have children with special needs.

Consequences

The findings indicate three consequences from using these strategies. One consequence is that prejudicial societal attitudes toward those with special needs continue to propagate throughout Guyana. Unfortunately, there is not adequate knowledge, awareness, resources, support, and advocacy for children with special needs. This also leads to teachers and parents not accessing support and training within areas of special education.

Another consequence is that children with special needs are concealed from both the community and the schools. Many parents of children with special needs conceal their children from society due to the surrounding negative attitudes from Guyanese society, the medical community, and other parents and teachers. These children are hidden and removed from society (Groenewegen, 2004). The stigmatization toward children with special needs fuels feelings of embarrassment and anxiety among parents. These feelings hinder parents from freely exposing their child within society. Thus children with special needs are kept from equally participating within the Guyanese community (Mitchell, 2005), and exercising their right to an education.

The final consequence is that educational reform toward a more inclusive system remains quiescent within Guyana. The phenomenon of persisting negative attitudes and perceptions toward those with special needs and varying conditions instigates strategies and actions. Consequently, a combination of these strategies may contribute to the stagnant educational reform toward inclusion.

Transforming beliefs toward those with special needs is pertinent to reforming the educational system within Guyana. Guyanese society must challenge its predominant culturally embedded prejudicial attitude toward those with special needs in order to instigate long-lasting educational reform. Teachers must reflect upon their personal moral purpose to reaffirm and support their attitudes toward inclusion (Fullan, 2003; Layton, 2005). Successful inclusion is driven by the moral purposes of educators in generating a commitment to include all children within regular classrooms, despite abilities. Within this study, few teacher participants of regular schools maintained positive experiences, and feelings of enjoyment and satisfaction in teaching children with special needs. These positive attitudes and beliefs are vital components in establishing inclusive education (Smith & Leonard, 2005).

Knowledgeable agents of change who are familiar with inclusion is essential to implementing inclusive education (Frankel & McKay, 1997). Change agents may serve as a source of support, as well as assist in complex emotions, relationships, and conflicts that may arise (Frankel & McKay, 1997, p. 69). As

motivators and initiators of inclusion, change agents can disseminate principles of inclusion throughout the educational systems of Guyana.

Participants referenced the importance of the *top level* in demonstrating interest, support, and prioritization for inclusion of children with special needs within the education system of Guyana. Guyanese educational officials must assume positive power (Hargreaves, 2004) as an inclusive leader and serve as an example to Guyanese society, teachers, and parents. Educational officials within the Ministry of Education must be collaborative leaders focused on educating all children (Fullan, 2001).

Although change may be initiated from a top down level, it must include the participation of diverse members involved within the change process (Frankel, 2006; Frankel & McKay, 1997; Hunt, Soto, Maier, Liboiron, & Bae, 2004) in order for the educational reform to be successful and meaningful. Implementing an inclusive education reform incorporates members such as officials from the Ministry of Education and the Ministry of Health, principals, directors, teachers, and parents. These members may exchange ideas, knowledge, experiences, and goals in order to achieve inclusive education within Guyana (Hunt et al., 2004).

Inclusive education reform may also be stimulated from a bottom up level. Parents of children with special needs can serve as powerful and passionate advocates for inclusion. A change toward inclusion that is generated by parents can transform stifled feelings of shame, humiliation, and disgrace experienced by many families of children with special needs. Parental support groups become a community where parents reveal concerns, feel acceptance free from judgment, and rely on the experiences of other members (Kramer, 1993). These groups provide emotional support, education, socialization, advocacy, and guidance through personal experiences (Pooley & Goetz, 1992). Parents within this study confirmed such benefits from the few parent support groups that currently exist in Guyana.

Educating Guyanese parents about special needs will foster a sense of awareness and empowerment in coping with their child. Vacca (2001) asserted that parent training boosts the self-confidence of parents, allowing them to understand what they are doing well and what they may need to change. Parent training is an opportunity to encourage parents during times of frustration (Vacca, 2001). It may also allow Guyanese parents to positively perceive their child and reduce feelings of shame; thus, they may no longer hide their child from the communities and schools.

Providing Guyanese teachers within regular schools with sufficient training, human resources, and equipment/materials necessary to include children with special needs may enhance their confidence. Teachers may feel more secure in their knowledge and abilities to manage children with special needs, as well as feel supported by other professionals and the government. Congruent with studies by Rose (2001) and Vaughn and Schumm (1995), Guyanese teachers do not feel adequately competent and qualified to include children with special needs within the regular classrooms. Similar to research conducted by Vaughn and Schumm (1995), teachers within Guyana accounted for the desire to receive more knowledge and training in order to better teach, accommodate the environment, and modify the curricula to include children with special needs. The additional resources will enhance the teaching and personal efficacy among Guyanese teachers, allowing them to be more receptive toward inclusion (Soodak, Podell, & Lehman, 1998).

Most developing countries do not cater for programs that educate and train professional supports at higher education institutions (e.g., university or college) (Eleweke & Rodda, 2002). However, including professional resources often ensures for successful inclusion (Vaughn & Schumm, 1995). Examples of human resources include, but are not limited to, teacher assistants, resource teachers, psychologists, speech and language pathologists, counselors, social workers, occupational therapists, behavioural therapists, etc. These professional supports will *assist in identification, referral, diagnosis, treatment, and provision of appropriate educational and related services* (Eleweke & Rodda, 2002, p. 117). Such professional supports will collaboratively provide Guyanese teachers with knowledge and assistance in order to achieve inclusion (Crawford & Porter, 2004).

Various organizations throughout Guyana have made attempts to generate awareness and promote rights for those with special needs (e.g., NCD, CBR, UNICEF Guyana, Ruimveldt parent support group, etc.). The Guyana Ministry of Health, in providing rehabilitation training and education, has also made attempts for those with special needs. The Guyana Ministry of Education also endeavored to

include the educational rights for children with special needs within the strategic plans (Government of Guyana, 2003).

In order to support educational reform toward inclusion in Guyana, societal attitudes must improve, change agents and resources must be accessed, and those working with children with special needs should maintain positive and intimate experiences. It is also necessary to consider the socio-political factors (i.e., social, economic, cultural, legal, and political), which operate as societal barriers oppressing those with special needs within Guyana (Turmusani, 2003). Guyanese society has the obligation to prioritize and provide for children with special needs, who equally maintain rights to participate within all aspects of their communities and regular schools.

Limitations and Future Research

There are a few limitations to consider when generalizing the findings of this research; in particular within the areas of sampling and data collection. However, the present study does highlight the need for further exploration of inclusive practices within Guyana.

Sampling. The sample of selected participants and regions were not randomly selected due to limitations such as time, duration of stay, and unfamiliarity with the country. Through collaboration with other organizations, participants and regions were conveniently, purposefully, and theoretically selected. Another limit is sample size, as it consisted of 22 participants. The sample size and regions greatly varied among each group of participants. In addition, only female perspectives are represented within this study.

Data collection. The focus group interviews posed challenges in managing and mediating discussions. At times it became difficult to differentiate between voices when transcribing audiotapes. However, maintaining observational field notes, as well as ensuring that participants clearly stated names before speaking in the interviews, controlled for this limitation. Also, regardless of attempts to report on complete verbatim responses from participants within both the individual interviews and focus group interviews, there may have been issues surrounding interviewer effects (e.g., interviewer's expectations or personal attributes [i.e., ethnicity, gender] may influence participants' responses; participants may provide responses to please or agree with interviewer's expectations) (Judd, Smith, & Kidder, 1991).

Future research. It is beneficial to examine the government of Guyana's stance toward the United Nations Convention on the Rights of Persons with Disabilities. Currently, Guyana is listed as a signatory country, but has not yet established it as a law within the country. Comparative studies may also be conducted between Guyana and other developing countries that are attempting to implement inclusive education. Examining successful implementation of inclusive education within other developing countries will assist Guyana in such educational reform. Furthermore, it is essential to continue investigating approaches and developing an understanding of the existing societal barriers toward those with special needs amidst the socio-cultural and political climate within Guyana.

Conclusions

Through accessing the perspectives of various Guyanese policy makers, teachers, and parents of children with special needs, four themes emerged as potential barriers to implementing inclusive education within Guyana: 1) attitudes and perceptions toward those with special needs, 2) change agents, 3) resources, and 4) experiences with children with special needs. In addition, a theory was developed grounded in the perspectives of participants in order to explain the interrelationship among these factors, as well as possible strategies and consequences. The identified core phenomenon and other existing conditions demonstrate a relationship between one another; the attitudes influence the state of the conditions and the conditions help to improve the attitudes. The present study draws attention to current factors that may be targeted to assist in the implementation and support of inclusive education within Guyana.

As the findings within this study suggest, the prevalent socio-cultural attitudes toward those with special needs requires transformation. Guyanese children with special needs must be perceived as active and contributing members of their schools and communities. Regardless of abilities, all Guyanese children must be viewed as having equal access to all aspects of society (e.g., educational, social, medical, etc.). As Fullan (2001) has stated, *changes in beliefs and understanding...are the foundation of achieving lasting reform* (p. 45). Transformation among the societal beliefs and attitudes will support transformation among the educational system (e.g., policy development, accessibility and

allocation of funds, securing of inclusion advocates, ensuring adequate special needs teacher training, proliferation of inclusion philosophies and shared commitments throughout schools, etc.). As citizens of Guyana continue to revise their beliefs and assumptions toward disability, successful and sustainable inclusive education will occur.

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